

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Thorsten Schwenke

Title: FLUID COMPOSITION USED
TO STIMULATE HUMAN
SYNOVIAL FLUID

Appl. No.: 10/588,680

International Filing Date: 2/11/2005

371(c) Date: 8/8/2006

Examiner: Kosar, Aaron J.

Art Unit: 1651

Confirmation Number: 9237

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Examiner Kosar:

Transmitted herewith is an amendment in the above-identified application.

- [] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.
- [] Assertion of Small Entity status is enclosed.

☒ The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	21	-	29	=	0	x	\$50.00	=	\$0.00
Independent Claims:	1	-	6	=	0	x	\$210.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$370.00	=	\$0.00
CLAIMS FEE TOTAL									\$0.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$120.00	\$120.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$460.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,050.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,640.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,230.00	\$0.00
EXTENSION FEE TOTAL:			\$120.00
<input type="checkbox"/>	Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:			\$120.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):		\$0.00
Extension Fees Previously Paid:			\$0.00
TOTAL FEE:			\$120.00

The above-identified fees of \$120.00 are being paid by credit card via EFS-Web. The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card

payment instructions in EFS-Web being incorrect or absent, resulting in a rejected or incorrect credit card transaction, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date August 22, 2008

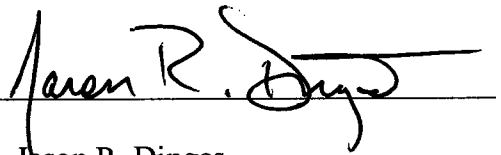
FOLEY & LARDNER LLP

Customer Number: **23524**

Telephone: (608) 258-4303

Facsimile: (608) 258-4258

By

A handwritten signature in black ink, appearing to read "Jason R. Dinges", written over a horizontal line.

Jason R. Dinges
Attorney for Applicant
Registration No. 55,114